

STATE OF NEW HAMPSHIRE

Statement of Receipts and Expenditures for POLITICAL COMMITTEES (RSA 664)

November 4, 2008 - General Election

I, Gina F Adams	Chairperson, and I, _Jo	hn F. Fulle	r		
(print name) Treasurer of the Federal Express Political Action Comm	rittec	(print name)			
Committee, located at 942 South Shady Grove Road	Memphis	TN	38120-4117		
(mailing address)	(town/city)	(state)	(zip code)		
report that the Committee has <u>receipts or expendit</u>	<u>ures exceeding \$500</u> for the	general (election and do submit the		
following report of receipts and expenditures.					
SUMMARY OF RECEIPTS AND EX	CPENDITURES FOR	CEN	ERAL ELECTION		
Date of Report: October 15	October 29		November 12 ☑		
l) Amount brought forward from Primary Election		1)	\$		
(Required only un first report filed for General Election)			(Indicate Surplus or Deficit)		
Receipts:					
 Total of all general election receipts in this repo 	rt	2)	s 103.50		
3) Total of all receipts previously reported for gene	eral election	3)	s 343.50		
4) Total of all general election receipts to date (Add lines 1,2 and 3)		4)	\$ 447.00		
Expenditures:					
i) Total general election expenditures in this report	Ĺ	5)	\$		
i) Total of general election expenditures previou <mark>s</mark> T	A DO A CO.	(6)	\$ 15,000.00		
() Total of expenditures to date for general election		7)	S 15.000.00		
B) Balance if SURPLUS	NOV 12 2008	8)	\$÷		
) Balance if DEFICIT	•	9)	s 14,553.00		
G , I , SEC	EW HAMPSHIRE RETARY OF STA	TE/			
Heral Jane	- Hoher	In la	isurer H/		
Signature of Committee Chairman	Signatu	re of Trea	isurer		
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Secretary of State's Office, State's	løuse. Room 201, Concord. Ne	w Hamps	hire 03301		
Phone: 603-271-3242 f-F	ax: 603-271/6316 http://www. lections@sos.state.nh.us	v.sos.nh.g	gov		
emau: e	uecuonszosos.siale.nn.us				

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GENERAL ELECTION ITEMI	ZED RECEIPTS			Reporti	ing period ending		11/04	2008	
Full Name of Contributor Alphabetical Order)	Post Office Address	Amour Contril		Date Received	Aggregate* Contribution to Date	5	If contribution of is over \$100 list Occupation	r aggreg : and	ate contribution Place of Busines
WILLIAM D BATESOLE	BOX 302 #8 ROGERS ST WALPOLE, NII 03608	\$10.00	10/31/2008		\$40.00		· · · · · ·		THECOT ENGINES
OHN F FULLER	7 LOWER RD PLAISTOW, NH 03865	\$10,00	10/31/2008	** - * - * - * - *	\$40.00	•			
MARIA L HANNEMANN	41 HORIZON DRIVE				· · · · · · · · · · · · · · · · · · ·				•
DWARD B HUTCHINSON	GOFFSTOWN, NH 03045 19 ASPEN DRIVE	\$15.00	10/31/2008		\$60.00	****			n. :
IMOTHY D MCLAUGHLIN	ATKINSON, NH 03811 6 HUCKINS DR	\$10.00	10/31/2008		\$40.00				
PANIELI QUINN	NEWMARKET, NH 03857 226 STONINGTON DRIVE	\$15.00	10/31/2008		\$60.00	******			Marie de la companya
SUSAN K TANGUAY	MANCHESTER, NH 03109 39 CRESTWOOD CIRCLE SALEM, NH 03079	\$7.00	10/31/2008		\$28.00		······································		
		\$7.00	= F0/31/2008		\$28.00				
olal of receipts unitemized (\$2	5 or under) in this report S 29.	and the second of the second of	10/31/2008		\$28.00				
otal of receipts unitemized (\$2 GENERAL ELECTION ITEM	5 or under) in this report S 29.	and the second of the second of	19/31/2008	······································		almusian	354		
	5 or under) in this report S 29.	and the second of the second of	Date	······································	Indicate to which	•	venditure applies of Expenditure	• • • • • • • • • • • • • • • • • • • •	
EENERAL ELECTION ITEM	5 or under) in this report S 29.	50 Amount	Date	*** e ***Primar	<i>Indicate to which</i> ry/General	•	* *		
GENERAL ELECTION ITEM	5 or under) in this report S 29.	50 Amount	Date	e ***Primai	Indicate to which ry/General O	•	* *		
GENERAL ELECTION ITEM	5 or under) in this report S 29.	50 Amount	Date	e ***Primai O	Andicate to which ry/General O	•	* *		
GENERAL ELECTION ITEM	5 or under) in this report S 29. UZED EXPENDITURES Post Office Address	50 Amount	Date	e ***Primai O O	Andicate to which ry/General O O	•	* *		
GENERAL ELECTION ITEM	5 or under) in this report S 29.	50 Amount	Date	****Primar O O O	Indicate to which ry/General O O O O	•	* *		
GENERAL ELECTION ITEM	5 or under) in this report S 29. UZED EXPENDITURES Post Office Address	50 Amount	Date	****Primar O O O O	Indicate to which ry/General O O O O	•	* *		

TOTAL P.02